



**DEPARTMENT OF VETERANS AFFAIRS
NEW YORK HARBOR HEALTHCARE SYSTEM**

STATEMENT OF UNDERSTANDING

HEALTH AND LIFE INSURANCE SELECTION

1. I have been advised that I have 60 days in which to enroll in a Health Insurance Plan (FEHB)
2. I have also been advised that I have 31 days in which to enroll in Optional Life Insurance (FEGLI) in addition to my Basic Life Insurance.
3. Additionally, I have been advised that I may enroll in the Thrift Savings Plan (TSP). I am aware that the government will not contribute any matching funds until the wait period has been served. I am aware that all funds are automatically invested in Government Securities until I designate otherwise through TSP.
4. If I do not make these elections on the date of my appointment, I will have to make these elections through Employee Express (EEX). I understand I will be forwarded a PIN NUMBER within 5 to 10 days after my appointment. If I do not receive a PIN NUMBER, I will call Employee Express (EEX) at 1-800-414-5272 or 1-478-757-3030 (TDD: 1-888-880-0412) and request that a PIN NUMBER be forwarded to my address of residence.

Employee's Signature

Date